2015 Rates for Indiana School Corporations

Plan	Coverage	Minimum Bi-weekly Employee Rate	Maximum Bi-weekly Employer Rate	Bi-weekly Rate	Minimum Monthly Employee Rate	Maximum Monthly Employer Rate	Monthly Rate	Minimum Annual Employee Rate	Maximum Annual Employer Rate	Annual Total Rate
Wellness	Single	\$45.98	\$174.30	\$220.28	\$99.62	\$377.65	\$477.27	\$1,195.48	\$4,531.80	\$5,727.28
	Family	\$70.04	\$530.04	\$600.08	\$151.75	\$1,148.42	\$1,300.17	\$1,821.04	\$13,781.04	\$15,602.08
Wellness W/ Non-Tobacco Use	Single	\$10.98	\$174.30	\$185.28	\$23.79	\$377.65	\$401.44	\$285.48	\$4,531.80	\$4,817.28
	Family	\$35.04	\$530.04	\$565.08	\$75.92	\$1,148.42	\$1,224.34	\$911.04	\$13,781.04	\$14,692.08
CDHP 1	Single	\$53.12	\$183.90	\$237.02	\$115.09	\$398.45	\$513.54	\$1,381.12	\$4,781.40	\$6,162.52
	Family	\$92.84	\$549.24	\$642.08	\$201.15	\$1,190.02	\$1,391.17	\$2,413.84	\$14,280.24	\$16,694.08
CDHP 1 W/ Non-Tobacco Use	Single	\$18.12	\$183.90	\$202.02	\$39.26	\$398.45	\$437.71	\$471.12	\$4,781.40	\$5,252.52
	Family	\$57.84	\$549.24	\$607.08	\$125.32	\$1,190.02	\$1,315.34	\$1,503.84	\$14,280.24	\$15,784.08
CDHP2	Single	\$112.16	\$199.38	\$311.54	\$243.01	\$431.99	\$675.00	\$2,916.16	\$5,183.88	\$8,100.04
	Family	\$256.58	\$580.20	\$836.78	\$555.92	\$1,257.10	\$1,813.02	\$6,671.08	\$15,085.20	\$21,756.28
CDHP 2 W/ Non-Tobacco Use	Single	\$77.16	\$199.38	\$276.54	\$167.18	\$431.99	\$599.17	\$2,006.16	\$5,183.88	\$7,190.04
	Family	\$221.58	\$580.20	\$801.78	\$480.09	\$1,257.10	\$1,737.19	\$5,761.08	\$15,085.20	\$20,846.28
Traditional PPO	Single	\$260.78	\$222.42	\$483.20	\$565.02	\$481.91	\$1,046.93	\$6,780.28	\$5,782.92	\$12,563.20
	Family	\$667.88	\$626.28	\$1,294.16	\$1,447.07	\$1,356.94	\$2,804.01	\$17,364.88	\$16,283.28	\$33,648.16
Traditional PPO	Single	\$225.78	\$222.42	\$448.20	\$489.19	\$481.91	\$971.10	\$5,870.28	\$5,782.92	\$11,653.20
W/ Non-Tobacco Use	Family	\$632.88	\$626.28	\$1,259.16	\$1,371.24	\$1,356.94	\$2,728.18	\$16,454.88	\$16,283.28	\$32,738.16